



**PUBLIC EMPLOYMENT RELATIONS COMMISSION**  
 Street: 603 EVERGREEN PLAZA BUILDING - 711 CAPITOL WAY  
 Mail: P.O. BOX 40919 OLYMPIA, WASHINGTON 98504-0919  
 (360) 753-3444

DO NOT WRITE IN THIS SPACE

**PETITION FOR INVESTIGATION OF  
 QUESTION CONCERNING REPRESENTATION**  
**[ ] Amended Petition in Case \_\_\_\_\_ -E- \_\_\_\_\_**

Instructions: See other side of this form.

Applicable Rules: Chapters 10-08, 391-08 and 391-25 WAC.

The petitioner claims that a question concerning representation exists involving certain employees of the employer named below.

**1. EMPLOYER** Western Washington University

CONTACT PERSON Dr. Karen W. Morse, President  
 ADDRESS 516 High Street  
 CITY/STATE Bellingham, WA ZIP 98225-5996  
 TELEPHONE (360) 650-3000 EXT. \_\_\_\_\_ FAX (360) 650-3022  
 ATTORNEY or Unknown  
 REPRESENTATIVE \_\_\_\_\_

ADDRESS \_\_\_\_\_  
 CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ EXT. \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

**2. PETITIONER** United Faculty of Western Washington/

United Faculty of Washington State  
 CONTACT PERSON Bill Lyne, Western WA University  
 ADDRESS 516 High Street, MS-9055  
 CITY/STATE Bellingham, WA ZIP 98225-5996  
 TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ EXT. \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

ATTORNEY or Eric R. Hansen  
 REPRESENTATIVE \_\_\_\_\_  
 ADDRESS Po Box 9100  
 CITY/STATE Federal Way, WA ZIP 98063-9100  
 TELEPHONE (253) 765-7024 EXT. \_\_\_\_\_ FAX (253) 946-7232

**3. INCUMBENT BARGAINING REPRESENTATIVE** Indicate:

☒ The employees involved are not currently represented for bargaining; or

☐ The employees involved are currently represented by:

ORGANIZATION \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ EXT. \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

ATTORNEY or \_\_\_\_\_  
 REPRESENTATIVE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ EXT. \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

**4. COLLECTIVE BARGAINING AGREEMENT** Indicate:

☒ There has never been an agreement covering the employees involved; or

☐ A copy of the current (or most recent) agreement is attached.

**5. SHOWING OF INTEREST** A petition filed by an organization or employees must be accompanied by a showing of interest showing that the petitioner has the support of 30% or more of the employees in the bargaining unit.

**6. BARGAINING UNIT**

**a. EMPLOYER'S PRINCIPAL BUSINESS**

State University

**b. DEPARTMENT OR DIVISION INVOLVED**

All

**c. DESCRIPTION OF BARGAINING UNIT** Indicate inclusions/exclusions, contract page or case/decision number:

All full-time and regular part-time employees of Western Washington University who are designated with faculty status, excluding casual or temp. employees as defined in WAC 391-35-350, Administrators, confidential employees, graduate student employees, post-doctoral and clinical emp. and emp. subject to Chapter 41.06 or 41.56 RCW.

**d. NUMBER OF EMPLOYEES IN BARGAINING UNIT** 702

**7. DESIGNATION OF REQUEST** Indicate:

☒ **RECOGNITION REQUEST.** The petitioner claims to represent a majority of the employees involved, and requests certification as exclusive bargaining representative of the bargaining unit.

☐ **CHANGE OF REPRESENTATIVE.** The employees in the bargaining unit desire to change their designation of exclusive bargaining representative, and to designate the petitioner as their exclusive bargaining representative.

☐ **DECERTIFICATION.** The employees in the bargaining unit no longer desire to be represented by any employee organization.

☐ **EMPLOYER PETITION - DEMAND FOR RECOGNITION.** The employer has been presented with one or more demands for recognition (per attached documentation), and requests a determination by the Commission.

☐ **EMPLOYER PETITION - INCUMBENCY QUESTIONED.** The employer has a good faith belief (per attached documentation) that a majority of employees no longer desire representation by the incumbent exclusive bargaining representative.

**8. OTHER RELEVANT FACTS** Indicate, if applicable:

☒ Additional information is set forth on separate sheets attached to this petition form.

**9. AUTHORIZED SIGNATURE FOR PETITIONER**

NAME (PRINT) Eric R. Hansen

SIGNATURE [Signature]

TITLE Staff Attorney DATE 12-15-04

8. OTHER RELEVANT FACTS

The measurement period for election eligibility is the winter and spring quarters of 2003-04 academic year and the fall quarter of the 2004-05 academic year.

The following are additional contact people for the Petitioner:

1. Edoh Amiran  
Western Washington University  
516 High Street, MS 9063  
Bellingham, WA 98225-5996
2. Steven Garfinkle  
Western Washington University  
516 High Street, MS 9061  
Bellingham, WA 98225-5996
3. Margaret Fast  
Western Washington University  
516 High Street, MS 9103  
Bellingham, WA 98225-5996
4. Gary McNeil  
Washington Education Association  
PO Box 9100  
Federal Way, WA 98063-9100
5. Armand Tiberio  
Washington Education Association  
PO Box 9100  
Federal Way, WA 98063-9100

CERTIFICATE OF SERVICE

I hereby certify that I have this day served a true and correct copy of the Petition for Investigation of Question Concerning Representation by mailing a copy to the below named parties of record to this proceeding, properly addressed with postage prepaid, through United States mail:

Dr. Karen W. Morse, President  
Western Washington University  
516 High Street  
Bellingham, WA 98225-5996

DATED at Federal Way, Washington, this 15<sup>th</sup> day of December 2004.

  
\_\_\_\_\_  
JOHN C. HARDIE